





## **HealthCheck Programs Acknowledgment Form**

Beginning January 1, 2014, US citizens are required to have health insurance. It is in your best interest to purchase health insurance to cover your medical needs. Health insurance is available to purchase through the online federal Marketplace at www.healthcare.gov.

	Initials
I am choosing <u>not</u> to purchase health insurance through the Marketplace.	
In doing so, I understand:	Initials
The Well Woman and FIT at Fifty HealthCheck Programs only cover screening and diagnostic	
procedures for breast, cervical, and colon cancer.	
By not purchasing health insurance, I will pay a tax penalty in 2014. This may cost up to \$285 per	
family in 2014 or up to 1% of my family's total income, whichever is greater.	
Each year I am without health insurance, my tax penalty will increase.	
I am responsible for paying for all of my healthcare needs outside of the services offered by the	
HealthCheck Programs.	
I will be enrolled in the Well Woman and/or FIT at Fifty HealthCheck Program for one year	
effective from the date I enroll. I will need to re-enroll in the WWHP and/or FFHP in one year or	
re-evaluate my opportunity for health insurance.	
I have explored health insurance options through the Health Insurance Marketplace with a Marketplace	
Navigator or Certified Application Counselor. I am declining to purchase health insurance thro	ugh the
Marketplace, and am choosing to enroll in the Well Woman and/ or FIT at Fifty HealthCheck Prog	ram.
Signature of Applicant	Date
Name of Applicant (Please print clearly)	
Signature of Markethlace Navigator or Certified Application Counselor	Date